

Long Term Care Options Counseling: Working With Older Adults

Janet L. Zander, CSW, MPA, Director
Aging & Disability Resource Center of Portage County

LTC Options Counseling: Older Adults

Goals and Objectives

- Older adults, who are they?
- Common issues – required knowledge base
- Barriers to accessing and/or accepting assistance
- Role of family, friends and neighbors

LTC Options Counseling: Older Adults

Wisconsin's Older Population

Age 60 and older = 907,552 – 16.9%

Age 65 and older = 702,553 – 13.1 %

Age 85 and older = 95,625 - 1.8%

Age 100 and older = 500 + (As of the
printing of the "Centenarian Spirit in Wisconsin", 2000)

Of those 65 and older: 96% white,
nearly 30% are below 200% of the
federal poverty level, 9 – 18% are still
employed, 67% are high school
graduates or beyond, less than 5%
have never married, 37% have some
type of disability, and only 5% reside in
a nursing home

U.S. Bureau of the Census, Census 2000



Demographic Changes

- “Baby Boomers” – people born between 1946 and 1964 will rapidly accelerate the growth in the older adult population.
- The number and the proportion of older people relative to the rest of the population is increasing.
- The most rapid growth is in the population 85 and older.
- Increasing racial and ethnic diversity among older people.

Older Adult Population...diversity:

- 60 – 100+ years of age
- Ethnicity/culture
- Religion
- Geography
- Economics
- Education
- Work experience
- Family

Avoid Stereotypes

Interact with older adults as individuals not on the basis of preconceived ideas –

- Inflexible
- Intolerant
- Non-productive
- Second childhood in need of parenting
- Myth of serenity – all old people are nice

Stereotypes (Cont.)

- Lonely and depressed
- Cheap or greedy
- Senile/dementia
- Deaf, poor vision, etc.
- Frail



Common Role Transitions/Losses in Later Life:

- Retirement
- Residential relocation
- Widowhood
- Health Changes
- Relatives/friends
- Independence levels
- Active parental roles

Transitions/losses don't always lead to negative consequences...

- Opportunities to explore new interests
- Challenges
- Freedoms



The majority of older adults successfully adapt to transitional stress and report relatively high levels of life satisfaction. The older you are the more experience you gain in handling transitions and coping with change.

A Different Perspective

Aging is a “continuation of human development.”

Thomas, M.D., William H. “What are Old People For? How Elders Will Save the World.” Acton, MA: VanderWyk & Burnham, 2004



“An elder is a person
Who is still growing,
Still a learner
Still with potential and
Whose life continues to have within it
Promise for and connection to the future.”

Barkan, Barry. *The Live Oak Definition of an Elder*

“...Tho’ much is taken, much abides; and tho’
We are not now that strength which in old days
Moved earth and heaven, that which we are, we are;
One equal temper of heroic hearts,
Made weak by time and fate, but strong in will
To strive, to seek, to find, and not to yield.”

Tennyson, Alfred. *Ulysses*. 1842

Assessments: Strengths & Needs

In order to truly be of value to an older adult, we must focus not just on an individual's deficits and needs, but also on his/her strengths, skills, and resources.



Getting the Contact

Less than 20% of people learned about the ADRC from written materials and advertisements. Most people knew about the ADRC from prior involvement in programs/ services or were referred by a family member, friend, or professional in the community.



Maintaining the Contact

- Actively listen to what is being said and what is not being said. Red flags.
- No "ready made" script. Be flexible and "meet people where they are at."
- No "wrong doors."
- "Dosing" information is different than withholding.
- Ongoing contact – relationship development to build trust and rapport.

Common Issues: Knowledge Base

- Long term care resources – continuum of in-home and community to residential options
- Caregiver support services
- Housing; home maintenance, modification, repair
- Volunteer opportunities/employment
- Financial assistance to meet basic needs – prescriptions, energy costs, food
- Transportation
- Mental Health and substance abuse

Common Issues: Knowledge Base (Cont.)

- Insurance – MC supplements, HMOs, prescription, long term care
- Health – disease specific, screening, prevention programming, resources, support
- End-of-life issues
- Advance Directives – Power-of-Attorney, Living Will, DNR bracelets, etc.
- Elder abuse
- Social, educational, recreational opportunities

Common Issues: Knowledge Base (Cont.)

- Estate Recovery
- Spousal impoverishment
- Public benefit programs
- Chore service providers
- Adaptive equipment/assistive technology

Funding Options

- Personal resources
- Public resources –
Medicare, Medical Assistance, SeniorCare, Family Care/LTC Waiver programs (COP, CIP, etc.), Alzheimer's Family Caregiver Support Program, National Family Caregiver Support Program, Veterans Services
- Community resources –
United Way, churches, nonprofit organizations and service groups



Barriers to accessing and/or accepting assistance

- Best kept SECRET
- Accessibility
 - Location
 - Office hours, after hours options
 - Availability of home visits
 - Atmosphere
 - Language – including jargon

Barriers to accessing and/or accepting assistance (Cont.)

- Assistive technology/alternate formats
- Electronic information
- Transportation
- Red tape
- Fear
- Pride
- Stigma related to public assistance
- Finances
- Family

Role of Family, Neighbors, & Friends

- ❖ 80% of all care needs are met by family and informal supports.



Role of Family, Neighbors, & Friends

- Help and support vs. “taking charge.”
- Family meetings – getting everyone on the same page
- Long distance caregivers
- Confidentiality
- Self-determination

Questions???

Thank you
